## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

**Application or Docket Number** 

493480

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
FOR			ER FILED	NUMBER I		RATE	FEE	. On 1	RATE	FEE
BASIC FEE							345.00	OR		690.00
TOTAL CLAIMS		2	minus 2	0= * , _	<del>)</del>	X\$ 9=		OR	X\$18=	X D
INDEPENDENT CLAIMS		AIMS	minus 3 = *			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		1	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR OR	TOTAL	. ~~
ł	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)					SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 39	Minus	-20	= 19	X\$ 9=		OR	X\$18=	342
	Independent	NTATION OF M	Minus	ENDENT CLAIM	=	X39=		OR	X78=	1 ,
	·	ATTON OF M	OLINI LL OLI I	LINDENT CEANIN		+130=		OR	+260=	V
-						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	1032
	· · · · · · · · · · · · · · · · · · ·	(Column 1) CLAIMS		(Column 2)	(Column 3)					·
<b>AENT B</b>		REMAINING AFTER AMENDMENT	And the second s	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	*** ENDENT CLAIM	=	X39=		OR	X78=	
	THOTTHESE	THATION OF W	OLIN LE DEFI	LINDENT CLAIM		+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	TOTAL SUBSEMINATION OF THE RESIDENCE	(Column 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
AME	Independent	MITATION OF M	Minus	*** ENDENT CLAIM	=	X39=	',	OR	X78=	
	rino i Prese	NIATION OF M	OLITPLE DEPI	ENDENT CLAIM		+130=			+260=	:
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+200= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										